Issue Classification



| Application/Control No. | Applicant(s)/Patent Under Reexamination |
|-------------------------|---|
| 10648019 | GAZDA ET AL. |
| Examiner | Art Unit |
| Abdou K Seye | 2194 |

| ORIGINAL | | | | | | | INTERNATIONAL CLASSIFICATION | | | | | | | | | | |
|--------------------|---|--|--|---|---------|---|------------------------------|---------------------|---|---|-------------|---|---------------------|--|--|--|--|
| CLASS SUBCLASS | | | | | CLAIMED | | | | | | NON-CLAIMED | | | | | | |
| 719 328 | | | | G | 0 | 6 | F | 9 / 54 (2006.01.01) | G | 0 | 6 | F | 9 / 45 (2006.01.01) | | | | |
| CROSS REFERENCE(S) | | | | | | | | | | | | | | | | | |
| CLASS | CLASS SUBCLASS (ONE SUBCLASS PER BLOCK) | | | | CK) | | | | | | | | | | | | |
| 717 | 147 | | | | | | | | | | | | | | | | |
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| | Claims renumbered in the same order as presented by applicant | | | | | | ☐ CPA ⊠ T.D. ☐ R.1.47 | | | | | | | | |
|-------|---|-------|----------|-------|----------|-------|-----------------------|-------|----------|-------|----------|-------|----------|-------|----------|
| Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original | Final | Original |
| 1 | 1 | | 17 | 17 | 33 | | | | | | | | | | |
| 2 | 2 | | 18 | 18 | 34 | | | | | | | | | | |
| 3 | 3 | | 19 | 19 | 35 | | | | | | | | | | |
| 4 | 4 | | 20 | | 36 | | | | | | | | | | |
| 5 | 5 | | 21 | | 37 | | | | | | | | | | |
| 6 | 6 | | 22 | | 38 | | | | | | | | | | |
| 7 | 7 | | 23 | | 39 | | | | | | | | | | |
| 9 | 8 | | 24 | | 40 | | | | | | | | | | |
| 8 | 9 | | 25 | | 41 | | | | | | | | | | |
| 10 | 10 | | 26 | | 42 | | | | | | | | | | |
| 11 | 11 | | 27 | | 43 | | | | | | | | | | |
| 12 | 12 | | 28 | | 44 | | | | | | | | | | |
| 13 | 13 | | 29 | | 45 | | | | | | | | | | |
| 14 | 14 | | 30 | | 46 | | | | | | | | | | |
| | 15 | 15 | 31 | | 47 | | | | | | | | | | |
| | 16 | 16 | 32 | | | | | | | | | | | | |

| /Abdou K Seye/ Examiner.Art Unit 2194 (Assistant Examiner) | 11/19/2008 (Date) | Total Claims Allowed: | | | | |
|--|----------------------|-----------------------|-------------------|--|--|--|
| (Primary Evaminor) | (P. I.) | O.G. Print Claim(s) | O.G. Print Figure | | | |
| (Primary Examiner) | (Date) | ' | 2 | | | |